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**Public Health Directorate**

**Finance and Performance Report – September 2014**

**1. SUMMARY**

**1.1 Finance**

Previous Status	Category	Target	Current Status	Section Ref.
-	Income and Expenditure	Balanced year end position	Green	2.1

**1.2 Performance Indicators**

Monthly Indicators	Red	Amber	Green	No Status	Total
August (No. of indicators)	5	1	12	0	18

**2. INCOME AND EXPENDITURE**

**2.1 Overall Position**

Forecast Variance - Outturn (Aug) £000	Directorate	Current Budget for 2014/15 £000	Current Variance £000	Current Variance %	Forecast Variance - Outturn (Sep) £000	Forecast Variance - Outturn (Sep) %
0	Health Improvement	9,022	-517	-14.4%	0	0.0%
0	Children Health	1,670	-31	-4.2%	0	0.0%
0	Adult Health & Well Being	895	-19	-9.6%	0	0.0%
0	Intelligence Team	37	-31	-168.2%	0	0.0%
0	Health Protection	20	-10	-100.0%	0	0.0%
0	Programme Team	189	-38	-47.7%	0	0.0%
0	Public Health Directorate	2,670	-180	-13.5%	0	0.0%
0	<b>Total Expenditure</b>	<b>14,502</b>	<b>-826</b>	<b>-13.8%</b>	<b>0</b>	<b>0.0%</b>
0	Anticipated carry-forward of Public Health grant	0	0	0.0%	0	0.0%
0	<b>Total Income</b>	<b>-14,502</b>	<b>0</b>	<b>-0.0%</b>	<b>0</b>	<b>0.0%</b>
0	<b>Net Total</b>	<b>0</b>	<b>-826</b>		<b>0</b>	

The service level budgetary control report for September 14 can be found in [appendix 1](#).

Further analysis of the results can be found in [appendix 2](#).

## **2.2 Significant Issues**

There was a proposal to September Health Committee that over-accruals on smoking cessation and sexual health from 2013/14, and non-recurrent underspend in 2014/15, should be used to pump-prime a fund to address health inequalities in Fenland. The Committee agreed that this proposal should be developed further.

Details of variances from budget at this point in the year are explained at appendix 2.

## **2.3 Additional Income and Grant Budgeted this Period (De minimus reporting limit = £160,000)**

Public Health is funded by a ring-fenced grant in the sum of £22.3m. Of this, £14.5m is allocated directly to the Public Health Directorate.

The allocation of the full Public Health grant is set out in [appendix 3](#).

## **2.4 Virements and Transfers to / from Reserves (including Operational Savings Reserve) (De minimus reporting limit = £160,000)**

There have been no virements made in the year to date, and this can be seen in [appendix 4](#).

## **3. BALANCE SHEET**

### **3.1 Reserves**

A schedule of the Directorate's reserves can be found in [appendix 5](#).

## **4. PERFORMANCE**

### **4.1 The Public Health Service Performance Management Framework (PMF) for August 2014 can be found in Appendix 6.**

The following commentary should be read in conjunction with the PMF.

#### **Chlamydia :**

- Although still below the year to date target this month's performance against the monthly target for the number of screens undertaken and number of positives has improved.
- At the CASH services all patients are routinely offered Chlamydia screening but there is feedback from the CASH services that many patients now decline as they say they have already been screened previously or at other locations.
- Outreach screening has started to improve. It is anticipated that the recent recruitment of new outreach bank staff and new screening venues (RAF Wyton and Bassingbourne and Huntingdonshire Football Club) will have a positive impact on our screening numbers over the coming months.
- The new Cambridgeshire Integrated Sexual Health and Contraception Service was launched on Oct 1 2014 which includes the chlamydia screening programme. Cambridgeshire Community Services has contracted with the Terence Higgins Trust to provide the outreach programme in the north of the county and will bring considerable experience of working with hard to reach groups.

- The Chlamydia Screening Programme targets young people between the age of 15 and 24 years of age. The programme was established in 2005 in response to an increase in the numbers of young people with the sexually transmitted infection chlamydia. Initially the focus was on screening a percentage of the target population each year. This has now changed to identifying and screening young people who are most at risk of being positive for chlamydia to enable them to be treated to decrease the spread of infection in the population. The recommended annual positive diagnosis rate is at least 2,400 per 100,000 15 – 24 year olds per year. Local areas are encouraged to identify their own diagnosis rates based on historical trends.
- The number of young people screened in Cambridgeshire is the highest in the East of England but the County has historically had a low positivity rate which is reflected in the local positivity trajectory for 14/15
- Chlamydia Screening Programme includes screening sites in GP practices, community pharmacies and contraceptive and sexual health services, currently all these services especially GP practices are reporting high positivity rates relative to the outreach part of the Programme. The Programme's strategic approach is to target those most at risk through outreach programmes to capture as many positive screens as possible.

### **Long Acting Reversible Contraception (LARC):**

The Long Acting Reversible Contraception (LARC) targets are based on actual figures achieved in 2013/14. Performance has improved over the past three years and consistently exceeded the annual trajectory. This reflects the improved ongoing training programme that has been accessed by primary care staff providing the service. There are two types of LARCs provided. The two types remain below the YTD target but the Implanon target remains above the monthly target. There has also been an improvement in the number of IUCDs inserted from the previous month. However it is expected that there will be variation in numbers achieved each month.

### **Health Checks:**

- Health Checks is cardio vascular risk assessment offered to people between the ages of 40 to 74. There is a 5 year rolling programme and each year and up to 20% of the eligible population should be invited to a health check. The important indicators are the number of health checks completed and the number of those invited who actually complete a health checks. The Health Checks Programme is provided by GP practices that are responsible for sending out invitations to the eligible population. The main concern has been the low take up of the invitations to a health check.
- The final end of year Health Checks data indicated that in Q4 there was an increase in the conversion rate from 39% in Q3 to 45.8%. However the figure for the whole of 13/14 was 40.6%. Nationally it was 49%. In Cambridgeshire 24.7% of the eligible population was offered a health check and 10% of the eligible population had a health check. Nationally the figures were 18.5% and 9%. In terms of overall numbers of health checks the target was 26,959 and 18,256 was achieved
- Reporting of Health Checks is quarterly. In 14/15 Q1 76% of the target number of health checks was achieved. Importantly there was a continued improvement in the number of health checks that were converted from offered to complete i.e. 43% from an annual figure of 41%. This represents efforts to encourage practices to improve their style of invitations and to promote the programme generally

*Health Checks are reported quarterly and there is no new data to report.*

This year there is a comprehensive Improvement Programme which involves staff training, new data collection software for practices, awareness campaigns for the public and additional staff support for practices.

### **Stop Smoking Programme:**

- 76% of the stop smoking target for 2013/14 was achieved, a drop from 92% in 12/13. This is reflected in the national trend that is attributed to the use of e cigarettes. The lower level of performance is continuing in 14/15 in Cambridgeshire with the performance figures generally remaining static, however there has been a slight improvement in July where the monthly performance against target was 63% as opposed to 55% in the previous month
- Performance in GP practices was especially poor and there is an ongoing problem with recruiting smokers to make quit attempts. There is an ongoing programme to improve performance with Camquit the core service providing increasingly higher levels of support to the other providers along with promotional activities. Practices are regularly visited with poor performers being targeted.
- There is considerable concern with the level of smoking in Fenland. A wide ranging intervention plan has been developed that will focus upon Fenland. This includes a mobile workplace service, a migrant worker Health Trainer post that will target these communities where smoking rates are high, a wide ranging promotional campaign and recruitment of an additional Stop Smoking Advisor to focus upon Fenland.
- Smoking rates in Cambridgeshire are also high amongst routine and manual workers and the programme of intervention also targets these groups.

### **School Nursing:**

- Year to date figures for school nursing show an over-performance on “group attendances” and “contacts”. Some variation in school nursing performance may be attributable to school holidays as the service is term-time only.

### **Childhood obesity:**

- The National Childhood Measurement Programme is undertaken annually over the course of the school year when all children in maintained schools in years 6 and reception are measured. The coverage levels and obesity rates are monitored. Appointments are made with schools but change over the year and the obesity rates are released after the end of the school year when the data has been cleaned. Therefore annual measurements will be reported. The results for the 12/13 year are now available and have the following headlines
  - Participation rates were 95.0% in Reception and 93.1% in Year 6 (England was 94.0% and 92.7% respectively)
  - Reception obesity = 7.5% (9.3% England) - a decrease from 8.0% in 2011/12
  - Year 6 obesity = 15.8% (19.2% England) - a decrease from 16.3% in 2011/12. Both have also decreased nationally.
  - Fenland remains the highest for obesity prevalence - but saw a noticeable decrease between 2011/12 and 2012/13 in Reception prevalence (12.2% to 9.4%) and Year 6 prevalence (22.3% to 18.9%). Hunts experienced an increase in Year 6 prevalence between the two years from 15.8% to 17.1%.
- The 2013/14 Measurement Programme is nearing completion and the 90% coverage target has already been met

### **Health Trainer Service**

- The Health Trainer Service is a lifestyle service focusing on supporting people to make healthy lifestyle changes. Based in GP practices found in the 20% most

deprived areas, the last Health Trainer contractual year ran from November 2012 to October 2013. Performance data from November 2013 – April 2014 indicates that the Service over performed, However there has been some drop in performance which has been attributed to a loss of four members of staff associated with the current tender of the Health Trainer Service. However there has been an improvement in the number of referrals which suggests that the new staff that have been recruited are having an impact on referrals

- The area where the performance is lowest is the number of personal health plans completed. This could reflect the high number of clients from high risk/deprived populations who often require support for longer periods as a client may see a health trainer for up to year.
- Although there has been some fall in performance it is generally good which reflects the on-going new types of initiatives that the service provides which includes new ways of working with GP practices and the use of social media and the wider community activities.

**4.2** The detailed Service performance data can be found in appendix 6.

## APPENDIX 1 – Public Health Directorate Budgetary Control Report

Forecast Variance Outturn (Aug) £'000		Service	Current Budget for 2014/15 £'000	Expected to end of Sep £'000	Actual to end of Sep £'000	Current Variance		Forecast Variance Outturn (Sep)	
						£'000	%	£'000	%
Health Improvement									
0	1	Sexual Health STI testing & treatment	4,592	1,943	1,819	-124	-6.36%	0	0.00%
0		Sexual Health Contraception	1,187	496	447	-50	-10.03%	0	0.00%
0		National Child Measurement Programme	86	43	42	-1	-1.96%	0	0.00%
0		Sexual Health Services Advice Prevention and Promotion	256	97	37	-61	-62.29%	0	0.00%
0		Obesity Adults	372	156	137	-19	-12.44%	0	0.00%
0		Obesity Children	182	71	50	-21	-29.76%	0	0.00%
0		Physical Activity Adults	97	46	46	0	0.00%	0	0.00%
0		Physical Activity Children	0	0	0	0	0.00%	0	0.00%
0	2	Stop Smoking Service & Intervention	1,260	461	249	-212	-46.04%	0	0.00%
0		Wider Tobacco Control	31	0	0	0	0.00%	0	0.00%
0		General Prevention Activities	909	281	252	-29	-10.44%	0	0.00%
0		Dental Health	51	0	0	0	0.00%	0	0.00%
0		Health Improvement Total	9,022	3,594	3,078	-517	-14.38%	0	0.00%
Children Health									
0		Children 5-19 PH Programme	1,670	755	724	-31	-4.15%	0	0.00%
0		Children Health Total	1,670	755	724	-31	-4.15%	0	0.00%
Adult Health & Wellbeing									
0	3	NHS Health Checks Programme	757	100	88	-12	-12.38%	0	0.00%
0		Public Mental Health	102	62	55	-7	-10.68%	0	0.00%
0		Comm Safety, Violence Prevention	36	36	36	0	0.00%	0	0.00%
0		Adult Health & Wellbeing Total	895	198	179	-19	-9.60%	0	0.00%
Intelligence Team									
0		Public Health Advice	15	8	2	-5	-68.69%	0	0.00%
0		Info & Intelligence Misc	21	11	-15	-26	-239.72%	0	0.00%
0		Intelligence Team Total	37	18	-12	-31	-168.19%	0	0.00%
Health Protection									
0		LA Role in Health Protection	15	8	0	-8	-100.00%	0	0.00%
0		Health Protection Emergency Planning	5	3	0	-3	-100.00%	0	0.00%
0		Health Protection Total	20	10	0	-10	-100.00%	0	0.00%
Programme Team									
0		Obesity Adults	36	18	14	-4	-23.11%	0	0.00%
0		Stop Smoking no pay staff costs	31	15	10	-6	-37.37%	0	0.00%
0		General Prevention, Traveller, Lifestyle	122	46	18	-28	-60.51%	0	0.00%
0		Programme Team Total	189	79	41	-38	-47.67%	0	0.00%

Forecast Variance Outturn (Aug) £'000	Service	Current Budget for 2014/15 £'000	Expected to end of Sep £'000	Actual to end of Sep £'000	Current Variance		Forecast Variance Outturn (Sep)	
					£'000	%	£'000	%
	Public Health Directorate							
0	Health Improvement	446	223	207	-16	-7.17%	0	0.00%
0	Public Health Advice	862	430	333	-97	-22.56%	0	0.00%
0	Health Protection	146	73	66	-7	-9.59%	0	0.00%
0	Programme Team	1,027	514	476	-38	-7.30%	0	0.00%
0	Childrens Health	62	31	28	-3	-9.68%	0	0.00%
0	Comm Safety, Violence Prevention	31	16	15	-1	-3.23%	0	0.00%
0	Public Mental Health	96	48	29	-19	-39.58%	0	0.00%
0	Public Health Directorate total	2,670	1,334	1,154	-180	-13.49%	0	0.00%
0	Total Expenditure before Carry forward	14,502	5,989	5,163	-826	-13.79%	0	0.00%
0	Carry forward of Public Health grant	0	0	0	0	0.00%	0	0.00%
	Funded By							
0	Public Health Grant	-14,463	-7,231	-7,231	0	0.00%	0	0.00%
0	Other Income	-39	0	0	0	0.00%	0	0.00%
0	Income Total	-14,502	-7,231	-7,231	0	0.00%	0	0.00%
0	Net Total	0	-1,242	-2,068	-826	-	0	0.00%

## APPENDIX 2 – Commentary on Expenditure Position

Number of budgets measured at service level that have an adverse/positive variance greater than 2% of annual budget or £100,000 whichever is greater.

Service	Current Budget for 2014/15 £'000	Current Variance		Forecast Variance - Outturn	
		£'000	%	£'000	%
<b>1)Sexual Health STI testing &amp; treatment</b>	<b>4,592</b>	<b>-124</b>	<b>-6.36%</b>	<b>0</b>	<b>0.0%</b>
The variance on Sexual Health STI testing & treatment results from over accruals in 2013/14, together with inflation not yet awarded.					
<b>2)Stop Smoking Service &amp; Intervention</b>	<b>1,260</b>	<b>-212</b>	<b>-46.04%</b>	<b>0</b>	<b>0.0%</b>
The variance on Stop Smoking Service & Intervention has arisen from underperformance which has meant an over accrual in 2013/14 for end of year payments, and ongoing underperformance in year.					

## APPENDIX 3 – Grant Income Analysis

The table below outlines the allocation of the full Public Health grant.

Grant	Awarding Body	Expected Amount £'000
<b>Public Health Grant as per Business Plan</b>	DofH	22,299
Grant allocated as follows;		
<b>Public Health Directorate</b>		14,463
<b>Children, Families &amp; Adults Services</b>		
Making Every Adult Matter		93
Community Navigators		119
Age UK Contract		51
Older People Day Services		51
Housing Related Support		51
Public Health Researcher		0
Personal, Social & Health Education		56
Children Centres		170
Mental Health Youth Counselling		111
Child & Adolescent Mental Health Trainer		71
Teenage Pregnancy		58
Drug & Alcohol Action Team		6,010
Changing Behaviours of Staff in CCC		92
<b>Economy, Transport &amp; Environment Services</b>		
Road Safety – Campaigns for Children		230
Road Safety – Accident awareness signs		20
Trading Standards – Kick Ash		31
Trading Standards – Alcohol underage sales		15
Trading Standards – Grants to encourage sporting activities		25
Trading Standards – Arts/Museums, to support wellbeing, social inclusion etc		20
Other Trading Standards initiatives		36
Registration & Library Service promotions		10
Changing Behaviours of Staff in CCC		31

<b>Grant</b>	<b>Awarding Body</b>	<b>Expected Amount £'000</b>
<b>Corporate Services</b>		
Research		51
Health & Wellbeing Board Support		26
Contact Centre		20
Overhead functions on behalf of Public Health		102
Changing Behaviours of Staff in CCC		31
Overheads associated with Public Health function (LGSS Managed)		100
<b>LGSS Cambridge Office</b>		
Overheads associated with Public Health function		155
<b>Total Public Health Grant</b>		<b>22,299</b>

#### APPENDIX 4 – Virements and Budget Reconciliation

	£'000	Notes
<b>Budget as per Business Plan</b>	14,482	
Non-material virements (+/- £160k)	20	PH Researcher now funded from PH, funding no longer transferred to CFA
<b>Current Budget 2014/15</b>	<b>14,502</b>	

## APPENDIX 5 – Reserve Schedule

Fund Description	Balance at 31 March 2014	2014/15		Forecast Balance at 31 March 2015	Notes
		Movements in 2014/15	Balance at 30 Aug 14		
	£'000	£'000	£'000	£'000	
<b>General Reserve</b>					
Public Health carry-forward	749	0	749	749	
<b>subtotal</b>	<b>749</b>	<b>0</b>	<b>749</b>	<b>749</b>	
<b>Equipment Reserves</b>					
Equipment Replacement Reserve	0	0	0	0	
<b>subtotal</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>Other Earmarked Funds</b>					
Other Reserves (<£50k)	0	0	0	0	
<b>subtotal</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>SUB TOTAL</b>	<b>749</b>	<b>0</b>	<b>749</b>	<b>749</b>	

(+) positive figures should represent surplus funds.

(-) negative figures should represent deficit funds.

It should be noted that £237k of the ring-fenced Public Health grant was carried forward by other service areas into 2014/15.

## APPENDIX 6 – Performance

	More than 10% away from YTD target
	Within 10% of YTD target
	YTD Target met

	Below previous month actual
	No movement
	Above previous month actual

The Public Health Service Performance Management Framework (PMF) for August can be seen within the tables below:

HEALTH IMPROVEMENT												
Service		Measures										
	Overall RAG status	Measure	Y/E Target 2014/15	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous month actual	Current month target	Current month actual	Direction of travel (from previous month)	Comments
Sexual Health & Family Planning : Treating and caring for people in a safe environment and protecting them from avoidable harm	A	Prevalence of Chlamydia. Number of positive screens.	1144	236	258	109%	G	89%	80	66%	↓	10% tolerance
		Chlamydia Screening - includes GP, CASH, Pharmacy and Outreach	14427	5353	5483	102%	G	73%	817	104%	↔	Information based on attendances. Outreach team activity was temporarily reduced following changes to procedures.
		GUM Access - Clinic 6 Oaktree Centre - 90% within 2 working days	90%	90%	96%	98%	G	93%	90%	95%	↑	Information based on attendances. Currently achieving 100% of target set.
		Dhiverse	100%	100%	100%	100%	G	100%	100%	100%	↔	
		LARC - access to long acting reversible contraception - Implanon Insertion	3098	1150	1095	95%	A	113%	183	107%	↑	2013/14 targets were exceeded
		LARC - access to long acting reversible contraception - IUCD Insertion	3204	1363	1190	87%	R	72%	237	76%	↑	
		Access to contraception and family planning	7088	5804	5969	103%	G	107%	1116	108%	↑	
Health Improvement: Caring for people and assisting in improving all aspects of their general wellbeing	A	Number of Health Checks completed	20000	5000		76%	R	n/a	5000		↑	Information reported quarterly
		Percentage of people who received a health check of those offered	50%	42%	43%	43%	G	n/a	42%			This provides information about the promotion of the Programme and patient engagement
		Smoking Cessation - four week quitters	3600	1181	685	58%	R	55%	261	63%	↑	Figures shown are for July 2014. A quit attempt and data follow up means a two month delay in reporting
		School Nursing : Contacts made	8125	2917	3589	123%	G	102%	0	33%	↓	Reduction in activity expected around the school holiday periods
		School Nursing : Group activities	4784	1717	1972	115%	G	165%	0	18%	↓	
		Childhood Obesity (School year) - 90% coverage of children in year 6 by final submission (EOY)	90%	90%	104%	104%	G	104%	90%	104%	↔	This is reported on Annually. This data is the final for the 2012/13 academic year
		Childhood Obesity (School year) - 90% coverage of children in reception by final submission (EOY)	90%	90%	105%	105%	G	105%	90%	105%	↔	
		Personal Health Trainer Service - number of referrals received	2205	1838	1638	89%	R	84%	184	88%	↑	
		Personal Health Trainer Service - number of initial assessments completed	1874	1562	1660	106%	G	156%	156	96%	↓	1-12 months intervention period. Figures are based on a rolling performance.
		Personal Health Trainer Service - Personal Health Plans completed	1115	930	766	82%	R	88%	93	61%	↓	Figures are based on a rolling performance.
		Number of referrals from Vulnerable Groups	661	551	1000	181%	G	173%	55	164%	↓	

\* All figures received in September relate to August actuals.

\*\* Direction of travel against previous month actuals

\*\*\* The assessment of RAG status for services where targets and activity are based on small numbers may be prone to month on month variation. Therefore RAG status should be interpreted with caution.